| Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. | | | | | |
|---|---|----------------------------------|------------|--|--------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | | Docket Number (Optional) | |
| FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | 12521-018 | |
| Application Number 10/087,193 | | | | Filed 2/28/2002 | |
| For Automated Self-Storage Reservation and Management System | | | | | |
| Art Unit 3628 | | | | Examiner Saliard, Shannon S. | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | |
| | | | <u>Fee</u> | Small Entity Fee | |
| | | One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ |
| | ✓ | Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | s <u>490</u> |
| | | Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | s |
| | | Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | s |
| | | Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | | | | |
| | A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. | | | | |
| \checkmark | | | | | |
| | ☐ The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| I am the applicant/inventor. | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | | | |
| attorney or agent of record. Registration Number | | | | | |
| attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 45,875 | | | | | |
| | S. Suf | | | <u>2-3-09 </u> | |
| (Signature Date | | | | | |
| Shahpar Shahpar , Reg. No. 45,875 602.255.6020 | | | | | |
| Typed or printed name Telephone Number | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | |

Total of Tot FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.